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## APPLICANTS

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\*\* CONTINUING DATA *105*

This application is a CIP of PCT/CA01/00905 06/15/2001

\*\* FOREIGN APPLICATIONS *105*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance	STATE OR COUNTRY CANADA	SHEETS DRAWING 10	TOTAL CLAIMS 56	INDEPENDENT CLAIMS 3
Verified and Acknowledged Examiner's Signature <i>SL-ell Dugay</i> Initials <i>ACD</i>					

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## TITLE

Hyperthermia treatment and probe therefor

FILING FEE RECEIVED 859	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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